

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NCLR Action PAC		FEC IDENTIFICATION NUMBER ▼ C C00626390	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Carlier, Natalie, , , * [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 790 NW 107th Ave		Amount 14.00	
City Miami	State FL	Zip Code 33172-3130	Transaction ID : VSGF29TVXM5
Purpose of Expenditure Reimb: Canvassing Transportation ultimate payee Shell		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Solidarity Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 1090 Vermont Ave NW Ste 300		Amount 15000.00	
City Washington	State DC	Zip Code 20005-4966	Transaction ID : VSGF29TVSW9
Purpose of Expenditure Radio Advertising Services		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	15000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gonzalez, Lawrence, , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 03 / 2016

Signature